

FILEDDate Received
Official Use Only

MAR 29 2010

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION**STATEMENT OF ECONOMIC INTERESTS****COVER PAGE***A Public Document*

Please type or print in ink.

2010 MAR 29 PM 2:48

KATHLEEN MORAN

COLUSA COUNTY CLERK RECORDER

NAME (LAST)	(FIRST)	(MIDDLE)	HOME/TELEPHONE NUMBER		
Marshall	Mark	D	[REDACTED]		
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE	OPTIONAL: E-MAIL ADDRESS
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Board of Supervisors

Division, Board, District, if applicable:

District III

Your Position:

Board Member

► If filing for multiple positions, list additional agency(ies)/
position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)☐ State☒ County of Colusa☐ City of _____☐ Multi-County _____☐ Other _____**3. Type of Statement (Check at least one box)**☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2009,
through December 31, 2009.**-or-**☐ The period covered is ____/____/____, through
December 31, 2009.☐ Leaving Office Date Left: ____/____/____
(Check one)☐ The period covered is January 1, 2009, through the
date of leaving office.**-or-**☐ The period covered is ____/____/____, through
the date of leaving office.☐ Candidate Election Year: _____**4. Schedule Summary**► Total number of pages
including this cover page: 5► Check applicable schedules or "No reportable
interests."I have disclosed interests on one or more of the
attached schedules:Schedule A-1 ☒ Yes – schedule attached
*Investments (Less than 10% Ownership)*Schedule A-2 ☒ Yes – schedule attached
*Investments (10% or Greater Ownership)*Schedule B ☐ Yes – schedule attached
*Real Property*Schedule C ☒ Yes – schedule attached
*Income, Loans, & Business Positions (Income Other than Gifts
and Travel Payments)*Schedule D ☒ Yes – schedule attached
*Income – Gifts*Schedule E ☐ Yes – schedule attached
*Income – Gifts – Travel Payments***-or-**☐ No reportable interests on any schedule**5. Verification**I have used all reasonable diligence in preparing this
statement. I have reviewed this statement and to the best
of my knowledge the information contained herein and in any
attached schedules is true and complete.I certify under penalty of perjury under the laws of the State
of California that the foregoing is true and correct.Date Signed March 9, 2010
(month, day, year)Signature [REDACTED]
(File the originally signed statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Mark D. Marshall

► NAME OF BUSINESS ENTITY
ARDEE Inc. 401K PSP

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Management of Insurance

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Mutual Funds (Describe)
☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
01 / 01 / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Bank of America

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
IRA

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

Comments:

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Mark D. Marshall

1. BUSINESS ENTITY OR TRUST

Marshall's Rent-All

Name

P.O. Box 745, Williams, CA 95987

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Party Rental

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION Owner

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☒ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold ☐ Other

Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Wayman's 76

Name

495 4th Street, Williams, CA 95987

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Gas Station

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship ☐ Partnership ☒ Spouse

Other

YOUR BUSINESS POSITION

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☒ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

Wayman's 76

Name of Business Entity or

Street Address or Assessor's Parcel Number of Real Property

495 4th Street, Williams, CA 95987

Description of Business Activity or

City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold ☒ Other

Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Mark D. Marshall

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ARDEE Inc.

ADDRESS (Business Address Acceptable)

P.O. Box 706, Willows, CA 95988

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Insurance

YOUR BUSINESS POSITION

Safety Officer

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income. List each source of \$10,000 or more

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

County of Colusa

ADDRESS (Business Address Acceptable)

546 Jay Street, Colusa, CA 95932

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Government Agency

YOUR BUSINESS POSITION

County Supervisor

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income. List each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Mark D. Marshall

▶ NAME OF SOURCE
 Granzella's Inc.

ADDRESS (Business Address Acceptable)
 P.O. Box 121 Williams, CA 95987

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Resturant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 10 / 09	\$ 40.00	Meal
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE
 Environmental Solutions Inc.

ADDRESS (Business Address Acceptable)
 2960 2nd Ave, 94132

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Consultant

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 25 / 09	\$ 100.00	Hunt & Dinner
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE
 Recology Inc.

ADDRESS (Business Address Acceptable)
 2720 S. 5th Ave, Oroville, CA, 95965

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Solid Waste

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 15 / 09	\$ 125.00	Golf Fundraiser
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

Comments: _____

